

STATEMENT OF ECONOMIC INTERESTS

Date Received
Official Use Only

COVER PAGE

Please type or print in ink.

03/22/11 23:23 CLK

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Halliday (LAST) 11 APR -1 AM 11:26 (FIRST) Barbara (MIDDLE)

1. Office, Agency, or Court

Agency Name

City of Hayward

Division, Board, Department, District, if applicable

City Council

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: _____ Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☒ City of Hayward

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left ____/____/____
(Check one)

-or-
The period covered is ____/____/____, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date ____/____/____

☐ The period covered is ____/____/____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

Date Signed

March 22, 2011
(month, day, year)

Signature

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

Barbara Halliday

▶ NAME OF BUSINESS ENTITY
Principal Financial group

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
investment firm

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☒ Other Variable Annuity
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Hewlett Packard

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
electronics manufacturer

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☒ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

▶ NAME OF BUSINESS ENTITY
Sonic Foundry

GENERAL DESCRIPTION OF BUSINESS ACTIVITY
software developer

FAIR MARKET VALUE
☒ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☒ Stock ☐ Other _____
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
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IF APPLICABLE, LIST DATE:
 / / 10 / / 10
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▶ NAME OF BUSINESS ENTITY

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

FAIR MARKET VALUE
☐ \$2,000 - \$10,000 ☐ \$10,001 - \$100,000
☐ \$100,001 - \$1,000,000 ☐ Over \$1,000,000

NATURE OF INVESTMENT
☐ Stock ☐ Other _____
(Describe)
☐ Partnership ☐ Income Received of \$0 - \$499
 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:
 / / 10 / / 10
 ACQUIRED DISPOSED

Comments:

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name _____
 Barbara Halliday

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER*	INTEREST RATE	TERM (Months/Years)
_____	_____ % <input type="checkbox"/> None	_____
ADDRESS (Business Address Acceptable)		

BUSINESS ACTIVITY, IF ANY, OF LENDER		

HIGHEST BALANCE DURING REPORTING PERIOD	SECURITY FOR LOAN	
<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> None <input type="checkbox"/> Personal residence	
<input type="checkbox"/> \$1,001 - \$10,000	<input type="checkbox"/> Real Property _____	
<input type="checkbox"/> \$10,001 - \$100,000	_____ Street address	
<input type="checkbox"/> OVER \$100,000	_____ City	
	<input type="checkbox"/> Guarantor _____	
	<input type="checkbox"/> Other _____	
	(Describe)	

FPPC Form 700 (2010/2011) Sch. C
FPPC Toll-Free Helpline: 866/275-3772 www.fppc.ca.gov

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name Barbara Halliday

▶ NAME OF SOURCE
 League of California Cities
 ADDRESS (Business Address Acceptable)
 1400 K Street, Suite 400, Sacramento, CA 95814
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Education and advocacy for cities in California

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 21 / 10	\$ 25.00	lunch
4 / 8 / 10	\$ 25.00	lunch
6 / 17 / 10	\$ 25.00	lunch

▶ NAME OF SOURCE
 Steve Miller
 ADDRESS (Business Address Acceptable)
 222 Country Club Drive, Hayward CA 94542
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Real estate developer

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
4 / 23 / 10	\$ 40.00	golf tournament tickets
9 / 1 / 10	\$ 30.00	lunch
/ /	\$	

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE
 Hayward Firefighters 1909
 ADDRESS (Business Address Acceptable)
 22734 Main Street, Hayward, CA 94541
 BUSINESS ACTIVITY, IF ANY, OF SOURCE
 Firefighter Association

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
1 / 30 / 10	\$ 100	dinner event
4 / 23 / 10	\$ 50	lunch event
/ /	\$	

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

▶ NAME OF SOURCE
 ADDRESS (Business Address Acceptable)
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
/ /	\$	
/ /	\$	
/ /	\$	

Comments: _____